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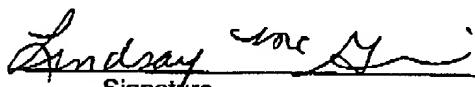
09/709,576
120/097
Nortel Ref. 12743MDUS02U

OFFICIAL

CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 C.F.R. 1.8

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Lindsay G. McGuinness.
Typed or printed name of person signing Certificate

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Response (12 pages)
Drawing – 1 sheet
Transmittal Letter x 2
Change of Correspondence
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Fee Transmittal (x2)

PTO/SB/21 (08-03)

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**TRANSMITTAL
FORM**
(to be used for all correspondence after initial filing)

		Application Number	09/709,576
		Filing Date	11/13/2000
		Inventor	Jovanovic
		Art Unit	2661
		Examiner Name	Phan
Total Number of Pages in This Submission		Attorney Docket Number	Nortel 12743MDUS02U our ref. 120-087

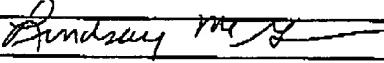
ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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Remarks

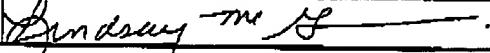
Please charge any deficiencies or credit any overpayments to deposit account number 502569.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Steubing McGuiness & Manaras LLP
Signature	
Date	July 23, 2004

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.P. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Type or printed name	Lindsay G. McGuiness		
Signature		Date	July 23, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (10-03)

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

 Applicant Claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$3,420.00)

Complete if Known	
Application Number	09/709576
Filing Date	11/13/2000
First Named Inventor	Jovanovic
Examiner Name	Phan
Art Unit	2681
Attorney Docket No.	120-097

METHOD OF PAYMENT (check all that apply)

 Check Credit Card Money Order Other None Deposit Account

Deposit Account Number: 502569

Deposit Account Name: Steubing McGuinness & Manaras LLP

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES				Fee Description	Fee Paid
Large Entity	Small Entity	Fee Code	Fee (\$)		
		1051	130	2051 65 Surcharge - late filing fee or oath	
		1052	50	2052 25 Surcharge - late provisional filing fee or cover sheet	
		1053	130	1053 130 Non-English specification	
		1812	2,520	1812 2,520 For filing a request for ex parte reexamination	
		1804	920*	1804 920* Requesting publication of SIR prior to Examiner action	
		1805	1,840*	1805 1,840* Requesting publication of SIR after Examiner action	
		1251	110	2251 55 Extension for reply within first month	
		1252	420	2252 210 Extension for reply within second month	420.00
		1253	850	2253 475 Extension for reply within third month	
		1254	1,480	2254 740 Extension for reply within fourth month	
		1255	2,010	2255 1,005 Extension for reply within fifth month	
		1401	330	2401 165 Notice of Appeal	
		1402	330	2402 165 Filing a brief in support of an appeal	
		1403	290	2403 145 Request for oral hearing	
		1451	1,510	1451 1,510 Petition to institute a public use proceeding	
		1452	110	2452 55 Petition to revive - unavoidable	
		1453	1,330	2453 665 Petition to revive - unintentional	
		1501	1,330	2501 665 Utility issue fee (or reissue)	
		1502	480	2502 240 Design issue fee	
		1503	640	2503 320 Plant issue fee	
		1450	130	1460 130 Petitions to the Commissioner	
		1807	50	1807 50 Processing fee under 37 CFR 1.17(q)	
		1808	180	1806 180 Submission of Information Disclosure Stmt	
		8021	40	8021 40 Recording each patent assignment per property (times number of properties)	
		1809	770	2809 385 Filing a submission after final rejection (37 CFR 1.129(a))	
		1810	770	2810 385 For each additional invention to be examined (37 CFR 1.129(b))	
		1801	770	2801 385 Request for Continued Examination (RCE)	
		1802	900	1802 900 Request for expedited examination of a design application	

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES FOR: UTILITY AND REISSUE

Total Claims	-20% =	Extra Claims	Fee from below	Fee Paid
Independent Claims	-3** =	X	X	=
Multiple Dependent				=

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Description	
1202 18	2202 9	Claims in excess of 20	
1201 86	2201 43	Independent claims in excess of 3	
1203 290	2203 145	Multiple dependent claim, if not paid	
1204 86	2204 43	*Reissue independent claims over original patent	
1205 18	2205 9	*Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$)

** or number previously paid, if greater. For Reissues, see above

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$3,420.00)

SUBMITTED BY					
Name (Print/Type)	Lindsay McGuinness	Registration No. (Attorney/Agent)	38549	Telephone	978-264-6664
Signature	Lindsay McGuinness			Date	7/23/2004

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